

National Osteoporosis Foundation
Comments
White House Conference on Aging
Listening Session
Leadership Council on Aging Members
September 10, 2004

Good morning, I am Judith Cranford, Executive Director of the National Osteoporosis Foundation, a member of the Leadership Council on Aging. Thank you for the opportunity to meet with you this morning. A White House Conference on Aging provides an important platform to address many key issues. I trust the information I present to you today on osteoporosis will be of interest and help as the breadth and depth of the conference is considered.

Osteoporosis is a condition in which bone mass and structure deteriorate, increasing an individual's risk for fracture. The scope and impact of osteoporosis in the United States is underscored when we consider that one in two women and one in four men age 50 and older will experience an osteoporosis related fracture in their lifetime.¹⁻⁴

The National Osteoporosis Foundation, often referred to as NOF, is the only national voluntary health organization solely focused on osteoporosis and bone health. NOF's mission is to promote lifelong bone health, improve the lives of those affected by osteoporosis and work to find a cure for the disease. With an estimated 44 million American men and women over of the age of 50 at risk for osteoporosis or low bone mass, the country faces a major public health threat for the growing population of aged adults.⁵

The following facts provide insight into the problems presented by osteoporosis, specifically for the aging population. In 1991, about 300,000 Americans age 45 and over were admitted to hospitals with hip fractures. Osteoporosis was the underlying cause of most of these injuries.⁶ An average of 24 percent of the hip fracture patients aged 50 and over die in the year following their fracture.⁷ One-fourth of those who were ambulatory before their hip fracture require long-term care afterward.⁸ At six months after a hip fracture, only 15% of hip fracture patients can walk across a room unaided.⁹ Numerous studies indicate that physicians may be missing opportunities to diagnosis and treat osteoporosis.¹⁰⁻¹³

Osteoporosis impacts a person's life in many ways: concerns such as a fear of falling and fracturing, pain associated with fractures, limited mobility and loss of height can all have a devastating impact on an individual's independence and overall sense of well-being. Depression can also be a serious outcome of osteoporosis.¹⁴ A patient's quality of life can be impacted by a diminished self-esteem and self-image as a result of living with osteoporosis.¹⁵

Consider for a moment, what it is like for the woman who can no longer easily lift herself from a chair, reach for food in her shelves, and is afraid to leave her home for fear of

falling. She quickly becomes isolated from her daily activities and community. Think about a person who cannot even allow a grandchild's embrace – because of fracturing so easily.

NOF hears from people nationwide everyday that are facing these life-altering challenges and concerns. At the local level, NOF works with patients and their families through support groups to help those living with osteoporosis. It is important to note that osteoporosis is a disease that does not discriminate. Men and women of all ethnicities are at risk and can be affected. Often issues related to osteoporosis become apparent when so many aging Americans are looking to continue a productive and active life.

Additionally, it is important to note that osteoporosis is not under the auspices of a particular medical specialty and thus lends itself to a multi-disciplinary approach. General practice physicians, physical therapists, nurses, nutritionists and other healthcare professionals can all come into contact with osteoporosis patients and those at risk.

We also cannot overlook the direct economic impact of osteoporosis that affects all Americans. The estimated national direct expenditures for osteoporosis and related fractures were \$17 billion in 2001 and the cost is rising.¹⁶

The timing of the 2005 White House Conference on Aging is particularly fortuitous because the Surgeon General plans to issue a premier report on osteoporosis and America's bone health later this month. It is interesting to note that the release of this report is a consequence of work in which NOF has been a key player, and we hope that we can provide the 2005 White House Conference on Aging with the benefit of our expertise.

The Conference and its related recommendations provide a significant opportunity for discussing, designating and operationalizing actions to improve the lives of the nation's continuously expanding aging population. Because of the enormous numbers of aging adults affected by osteoporosis; the pervasiveness of its effects on their lives and that of their families; the huge cost to society - financial, physical, and emotional; and because the severity of the consequences of osteoporosis are, in part, preventable, this disease should be discussed and analyzed thoroughly at the Conference. We view this as a major opportunity to raise people's awareness of osteoporosis, educate them about the disease and seek policy solutions to meet the growing public health threat that osteoporosis and low bone mass pose to this nation.

We are aware that as you begin to structure the 2005 Conference, numerous options will present themselves. We submit that we are ready to work with you to help structure a meaningful and beneficial format in which to present the essential facts about osteoporosis as a platform for discussion and recommended action. For those individuals either with osteoporosis or at risk of the disease, there is an urgent need for comprehensive, broad-reaching programs. For other chronic diseases, there are clearly delineated national action plans to effectively utilize national, state and local resources and appropriately address the concerns associated with those diseases.

We would like the White House Conference on Aging to support national action on osteoporosis. This should include the following core components: greater access to care through expansion of osteoporosis screening to more Medicare eligible men; comprehensive prevention, education, and awareness efforts targeted to the public, caregivers, and healthcare providers; and finally, public policies at the federal level to assist states in their efforts to fight osteoporosis. Osteoporosis has a direct relationship with a breadth of other issues such as adequate provisions for long-term care, continuity of healthcare and geriatric services, and the impact on caregivers. With the advent of the Surgeon General's report, NOF anticipates the ability to elaborate on specific ways to address osteoporosis, thereby making the report a platform to prevent and treat the disease.

In conclusion, we urge you to recognize the scope of the impact of osteoporosis on the aging population. We stand ready to work with you to address the looming public health crisis that it represents. I thank you for your time and attention today.

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